

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>W</i>	<i>71423</i>	<i>11-25-90</i>
FORMALITY REVIEW			<i>1/26/91</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
50	10/27/90
51	10/27/90
52	10/27/90
53	10/27/90
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100	10/27/90

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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